**LEGAL OWNER** Street or P.O. Box City or Town State ZIP Code 98 PROPERTY OWNERSHIP (Also provide address in section 12 if different from 7A.) 7.C. OWNER TYPE 7.D. PROPERTY TYPE P

ECL (Rev. 5/92), Frame

B-4834-8

|                             | NAME OF INSTALLATION   | 3 314   |   | 8.B                                    | SITE     | ID#                         |           |                     |
|-----------------------------|--|---|---|--|----------|-----------------------------|-----------|---------------------|
| (                           | Same as Item No. 3)  | A BOARD   | HU INS                                  | THANK                                  | E        | VUE                         | 7 20      | m                   |
| 9. 7<br>ir                  | TYPES OF REGULATED DANGEROUS Wastructions for this section carefully—Enter   | 'ASTE ACTIVITIES<br>an "X" in any secti                                 | S YOUR BU                               | JSINESS IS<br>9.B., or 9.0             | CONI     | DUCTING (F                  | Read &    | ≩ follo             |
| 9.A. H                      | HAZARDOUS WASTE ACTIVITIES (See in:  | structions for defin  | tions of the                            | se activities                          | ).       |                             |           | D M                 |
|                             | ☐ 1. GENERATOR ☐ 1a. Conduct on  |   |   | ICH CHAN                               | BRAN     | NAGEMENT                    | AM d      | YASI                |
|                             | ☐ 2. TRANSPORTER 2a. ☐ Transpor  | t Wastes Commerc<br>ansport: (1) ☐ High                                 | cially (for hir<br>nway (2)             | e).<br>Air (3) 🗆                       | Rail (   |                             |           |                     |
|                             | 3b   | . ☐ Facility accept . Process conduct (1) ☐ Treatment (4) ☐ Other (spec | ed or availa<br>(2)  Storticify in comm | ble at this fage $(3) \square$ nents). | acility; | erators.                    | ify in co | mments              |
|                             | 4. IMMEDIATE RECYCLER  | . 4.1.2.1.100033  | L ics Li                                | 10                                     |          |                             |           |                     |
|                             | 5. PERMIT-BY-RULE FACILITY   |   |   |  |          | ASHING IS                   |           |                     |
|                             | 6. MARKET OR BURN DANGEROUS W  | ASTE FUELS—6a   | .   Generate                            | or Marketing                           | to Burn  | ner 6b □ Ot                 | her Ms    | arkotor             |
|                             | 6c.  | ☐ Burner. (COMPL  | ETE 9c.—T                               | YPE OF CC                              | MBUS     | TION DEVIC                  | E)        | inclei              |
| 9.B. U                      | SED-OIL FUEL ACTIVITIES  |   |   |  |          |                             |           |                     |
|                             | 1. OFF-SPECIFICATION USED-OIL FUELS—1a.  | ☐ Generator Marketing   | to Burner 1                             | o. □ Other Ma                          | arketer  | 1c Rurner                   | Comple    | oto Oo \            |
|                             | 2. SPECIFICATION USED-OIL FUEL MARKETER  | (or ON-SITE BURNER  | R) WHO FIRS                             | CLAIMS TH                              | E OIL MI | EETS THE SPE                | CIFICA    | ATION               |
| 9.C. D                      | ANGEROUS WASTE OR OFF-SPECIFICA  | TION USED-OIL F   | UEL BURN                                | ING: TYPE                              | OF C     | OMBUSTION                   | N DEV     | ICF.                |
| (s                          | ee instructions for definitions of combustion dev  | ices) 1. 🗆 Utility Bo   | oiler 2. 🗆 In                           | dustrial Boile                         | r 3.     | Industrial Fu               | mace      | IOL.                |
|                             | ASTE IDENTIFICATION (Copy this page if   |   |   |  |          | , modelinar r di            | nace.     |                     |
| N                           | A.   | you have more that  | B.                                      | streams)                               |          |                             |           |                     |
| L U<br>I M<br>N B           | DESCRIPTION OF WASTE(S   |   |   | EROUS                                  |          | ESTIMATED                   |           | W D.<br>E C         |
| E E                         | DESCRIPTION OF WASTE(S   | ,   | WASTE N                                 | UMBER(S)                               |          | ACTUAL ANNU<br>ASTE QUANTIT |           | G D<br>H E<br>T     |
| 1                           |  |   |   |  |          |                             | 1 3       |                     |
| 2                           |  |   |   |  |          |                             |           |                     |
| 3                           |  |   |   |  |          |                             |           |                     |
| 4                           | GREEN HISTORICAL   |   |   | 111                                    |          | 39 0                        | 7127      |                     |
|                             |  |   |   |  |          |                             |           |                     |
| 5                           |  |   |   |  |          |                             |           |                     |
|                             | mplete sections A, B or C. Section D is ma  (Batch Frequenty) 11.B  OUANTITY WEIGHT  CODE  | ndatory.  PER MONTH   | WEIGHT                                  | 1                                      | 1.C. [   | ONE-TIME                    |           | Y<br>WEIGHT<br>CODE |
| 11.D.                       | AMOUNT TO BE ACCUMULATED ON-SIT  | E PRIOR TO SHIP   | PMENT [                                 | QUANTITY                               | ľ        | WEIGHT                      |           |                     |
| 12. 0                       | COMMENTS TRACED TO   | and inter   | 1111                                    | 194                                    | (        | CODE                        | 7 4       | 10                  |
| to                          | le applied for   | ii siii   | en ely                                  | 77.                                    | 11       | Mic 1.                      | D.F       |                     |
|                             | h  |   |   |  |          |                             | . ~       |                     |
|                             |  |   |   |  |          |                             |           |                     |
|                             |  |   |   |  |          | age us<br>si signi          |           |                     |
| 13. C                       | ERTIFICATION   |   |   |  |          | - Dates                     | 1101      |                     |
| l certi<br>attach<br>inforn | ify under penalty of law that I have personally hed documents, and that based on my in nation, I believe that the submitted information ties for submitting false information, including | quiry of those ind<br>on is true accurate                               | ividuals imm                            | nediately re                           |          |                             |           |                     |
| SIGNATI                     |  | NAME AND OFFICIA  |   |  | DATE     | E SIGNED                    |           |                     |
|                             | ohn touckes  |   |   |  |          |                             |           |                     |
| CIVIDA                      | U IVII I U ULKUL   | John Foult  | -65, 60                                 | ntrolle                                | NI       | -26.95                      |           |                     |

### U.S. ENVIRONMENTAL PROTECTION AGENCY

# ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

THIS IS TO ACKNOWLEDGE THAT YOU HAVE FILED A NOTIFICATION OF HAZARDOUS WASTE ACTIVITY FOR THE INSTALLATION LOCATED AT THE ADDRESS SHOWN BELOW TO COMPLY WITH SECTION 3010 OF THE RESOURCE CONSERVATION AND RECOVERY ACT (RCRA). YOUR EPA IDENTIFICATION NUMBER MUST BE INCLUDED ON ALL SHIPPING MANIFESTS FOR TRANS—PORTING HAZARDOUS WASTES; ON ALL ANNUAL REPORTS THAT GENERATORS OF HAZARDOUS WASTE, AND OWNERS AND OPERATORS OF HAZARDOUS WASTE TREATMENT, STORAGE AND DISPOSAL FACILITIES MUST FILE WITH THE EPA; ON ALL APPLICATIONS FOR A FEDERAL HAZARDOUS WASTE PERMIT; AND ON ALL OTHER HAZARDOUS WASTE MANAGEMENT REPORTS AND DOCUMENTS REQUIRED UNDER SUBTITLE C OF RCRA.

EPA I.D. NUMBER ==> WAD988494233

MAILING ADDRESS ==> PACIFIC SVCS & MFG 19331 21ST AVE W

LYNNWOOD

WA 980364832

INSTALLATION ADDRESS ==> 19331 21ST AVE W

LYNNWOOD

WA 980364832

12/27/91



### WASHINGTON STATE **DEPARTMENT OF ECOLOGY**

Attn: DW Notifications M/S PV-11 Olympia, WA 98504-8711 (206) 459-6387

| W     | A       |              |
|-------|---------|--------------|
| RCV'D |         | SEP 1 7 1991 |
|       | LOG     | SEP 1        |
| RE    | VIEW JP | 9 20 91 NA   |
| G/    | WAC     |              |

FORM 2

| NUTIFICATION OF DANGEROUS WASTE ACTIVITIES  |
|---|
| 1. A. FIRST NOTIFICATION (No previous application has been made for this site)  B. REVISED NOTIFICATION DATE (Enter existing site I.D. No. in Part 1F. List sections you revised:   |
| C. WITHDRAW SITE I.D. NO. DATE D. REACTIVATE SITE I.D. NO. (Complete all sections of the form (Complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in Part 1F.)   |
| E. CANCEL SITE I.D. NO. DATE  (Site closed—no longer own or conduct business at this site. Complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. In/1F)  **The complete I.D. No. In/1F)  **The complete Sections 1F, 2-8 & 13. Enter existing I.D. No. In/1F)  **The complete III III III III III III |
| 2.A. WASHINGTON STATE DEPARTMENT OF 2.B. SIC CODE(S) REVENUE REGISTRATION (TAX) NUMBER PRIMARY SECONDARY OTHER  |
| 600-543-064 3449  |
| 2.C. TYPE OF BUSINESS CONDUCTED AT THIS SITE MONUPACTURING  |
| PACIFIC SERVICES & MFG.   |
| 4. LOCATION OF INSTALLATION   |
| Street  |
| 19331-215T AVE W DEC 11 1991  |
| County Name SNOHOMUSH / OB WASTE MANAGEMENT BRANCH  |
| City or Town State ZIP Code   |
| LYNNWOOD WA98036-4832   |
| 5. INSTALLATION MAILING ADDRESS   |
| Street or P.O. Box  |
| 19331-211ST AVE W   |
| City or Town State ZIP Code   |
| LYNNW000 WA98036-4832   |
| 6.A. INSTALLATION CONTACT   |
| Name (last) (first)   |
| LESH STEVEN   |
| Job Title Phone Number  |
| PRODUCTION MGR 206-775-3513   |
| 6.B. INSTALLATION CONTACT MAILING ADDRESS (see instructions)  BOX 1 BOX 2   |
| Street or P.O. Box  |
| City or Town State ZIP Code   |
| City or Town State ZIP Code —   |
| 7.A. NAME OF INSTALLATION'S LEGAL OWNER   |
| WALTER JPISCO   |
| Street, P.O. Box, or Route Number   |
| 19331-215T AVE W  |
| City or Town State ZIP Code   |
| LYNNWOOD WA98036-4932   |
| 7.B. PROPERTY OWNERSHIP (Provide address in section 12 if different than 7A.)   |
| WALTER JPISCO   |
| 7.C. OWNER TYPE 7.D. PROPERTY TYPE  |
| P P12/18/91 W   |

| 8.A. N.                         | AME OF INSTALLATION Pacific ?   | betvices + Monufa  | cturing 8.E   | . EPA I.D.   | NO                  |                     |                                       |                    |
|---------------------------------|---|--|---|--|---------------------|---------------------|---------------------------------------|--------------------|
|                                 | YPES OF REGULATED DANGEROUS   |  |   |  |                     |                     |                                       |                    |
| 9.A. H                          | IAZARDOUS WASTE ACTIVITIES (See   | instructions for definition  | ons of these  | activities   | ).                  |                     |                                       |                    |
| Þ                               | 1. GENEDATOR ☐ 1a. Conduct or   | -site recycling  |   |  |                     |                     |                                       |                    |
|                                 | 2. TRANSPORTED 2a.   Transport 2b. Modes of Transport   | Wastes Commercially ansport: (1)  Highway  | (for hire).<br>(2) 🗌 Air  | (3) 🗆 Ra   | ail (4              | ) 🗆 W               | ater (5)                              | ☐ Other            |
|                                 | 3. MANAGEMENT FACILITY (TSD)  | 3a.  Facility accepts 3b. Process conducted (1)  Treatment (4)  Other (special Course Part A —— Part B Process | l or availab<br>(2) □ Store<br>ify in comm<br>_//                 | le at this f<br>age (3)<br>ents).  | acility             | ;                   |                                       | ecify in comments. |
|                                 | 4. IMMEDIATE RECYCLER 5. PERMIT-BY-RULE FACILITY  |  |   |  |                     |                     |                                       |                    |
|                                 | 6. MARKET OR BURN DANGEROUS   | WASTE FILE S- 60 F   | Generator   | Marketina ta   | Rume                | r Sh                | □ Other N                             | Aarketer           |
| <u> </u>                        | O. WARRET ON BORN DANGEROOD   | 6c. ☐ Burner. (CC  |   | _  |                     |                     |                                       |                    |
| 9.B. U                          | ISED-OIL FUEL ACTIVITIES.   |  |   | `  |                     |                     |                                       |                    |
| ,                               | 1. OFF-SPECIFICATION USED-OIL FUELS-  | 1a - Generator Marketina   | to Burner 1h  | □ Other N  | larkata             | r 10 [              | Rumer (C                              | Complete 9c )      |
|                                 | 2. SPECIFICATION USED-OIL FUEL MARKI  |  |   | •  |                     |                     |                                       |                    |
|                                 |   |  |   |  |                     |                     |                                       |                    |
| 9.C. D                          | ANGEROUS WASTE OR OFF-SPECIF  | CATION USED-OIL FUE  | L BURNING   | TYPE O   | F CON               | <b>MBUST</b>        | ION DEVI                              | CE.                |
|                                 | (see instructions for definitions of combustion   | levices) 1. 🗆 Utility Boiler   | 2. 🗌 Industria  | Boiler 3.  | Indust              | rial Fun            | ace.                                  |                    |
|                                 |   |  |   |  |                     |                     |                                       |                    |
|                                 | VASTE IDENTIFICATION (Copy this page if the test)   | ou have more than 5 waste stres  |   | mation (section  |                     | 11-13) n            | ot needed on                          |                    |
| A. N                            | В.  |  | C.  | EROUS  | D.                  |                     | MATED                                 | W E.               |
| N B<br>E E<br>R                 | DESCRIPTION OF WAS  | TE(S)  |   | NUMBER   | V                   | VASTE (             | L ANNUAL<br>DUANTITY                  | G D<br>H E<br>T    |
| 1                               | Valoro  |  | FO03  |  | 480                 | $\prod$             |                                       | P                  |
|                                 | Xylene  |  |   | 4 4 1  | 10                  |                     |                                       |                    |
|                                 |   |  | ' ' '<br>   | 1 1 1  | ++                  | ++-                 |                                       | 1-1                |
|                                 |   |  | 1 1 1   |  |                     |                     |                                       | -                  |
|                                 |   |  |   |  |                     |                     |                                       |                    |
|                                 |   |  |   |  |                     |                     |                                       |                    |
| 11 Co                           | emplete a, b, or c; AND d below.  | <del></del>  | <u> </u>  | ·  |                     | -11                 | <u></u>                               | <del></del>        |
| 11. 00                          | implete a, b, of c, AND a below.  |  |   |  |                     |                     |                                       |                    |
| 11.A.                           | ☐ (Batch Frequency  | QUANTITY WEIGH   | <b>T</b>  | PER MC   | NTH                 | 40                  | DUANTITY                              | CODE               |
|                                 | QUANTITY  | WEIGHT   |   |  |                     |                     | DUANTITY                              | WEIGHT             |
|                                 | ONE-TIME-ONLY   | 11.D. AMOU   |   | ACCUMULA<br>O SHIPME   |                     | 48                  | 0                                     | COOK               |
| 11.C.                           |   | CODE CIA-OI  | TE PRIOR T  |  |                     |                     |                                       | <del></del>        |
|                                 |   | CODE CI4-SI  | TE PRIOR 1  | ·············  |                     |                     |                                       | 1                  |
|                                 | COMMENTS  | CODE CIN-SI  | TE PRIOR 1  |  |                     |                     |                                       |                    |
|                                 | COMMENTS  | CODE   | TE PRIOR 1  |  |                     |                     |                                       |                    |
|                                 | COMMENTS  | CODE   | TE PRIOR 1  |  |                     |                     | · · · · · · · · · · · · · · · · · · · |                    |
|                                 | COMMENTS  | CODE   | TE PRIOR 1  |  |                     |                     |                                       |                    |
|                                 | COMMENTS  | CODE   | TE PRIOR 1  |  |                     |                     |                                       |                    |
|                                 | COMMENTS  | CODE   | TE PRIOR 1  |  |                     |                     |                                       |                    |
| 12. 0                           | CERTIFICATION   | CODE   | TE PRIOR 1  |  |                     |                     |                                       |                    |
| 13. () I certification submit   | CERTIFICATION  Ify under penalty of law that I have personal nents, and that based on my inquiry of thos litted information is true, accurate, and comp   | lly examined and am famili<br>e individuals immediately re   | ar with the in  | obtaining th   | ne infor            | mation,             | l believe t                           | hat the            |
| 13. () I certification submit   | CERTIFICATION  Ify under penalty of law that I have personance in the personance is the personance in the personance is the personance in | lly examined and am famili<br>e individuals immediately re   | ar with the in<br>sponsible fo<br>are significa                   | obtaining the ob | ne infor<br>for sub | mation,             | l believe (<br>false infor            | hat the            |
| 13. (I certi docum submi includ | CERTIFICATION  Ify under penalty of law that I have personance in the personance is the personance in the personance is the personance in | lly examined and am famili<br>e individuals immediately re<br>plete. I am aware that there                     | ar with the in<br>sponsible fo<br>are significa<br>AL TITLE (type | r obtaining the  | ne infor<br>for sub | mation,<br>omitting | I believe (<br>false infor            | hat the            |



## WASHINGTON STATE DEPARTMENT OF ECOLOGY

Attn: DW Notifications M/S PV-11 Olympia, WA 98504-8711 (206) 459-6387

FORM 2

| RCV'D     | SEP 1 7 1991 |
|-----------|--------------|
| LOG       | SEP 1        |
| REVIEW JP | 9 20 91 NA   |

## NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

|  | DAMACINOO ASHOIL MONIANIES  |
|--|---|
| 1. A. FIRST NOTIFICATION (No previous application has been made for this site)   | B. REVISED NOTIFICATION DATE (Enter existing site I.D. No. in Part 1F. List sections you revised:   |
| C. WITHDRAW SITE I.D. NO. DATE (Complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in                             | D. REACTIVATE SITE I.D. NO. (Complete all sections of the for   |
| ☐ E. CANCEL SITE I.D. NO. DATE   | F. EXISTING I.D. NO. WAD988494233   |
| (Site closed—no longer own or conduct business at this s<br>Complete Sections 1F, 2-8 & 13. Enter existing I.D. No. in | evos & Mta  |
| 2.A. WASHINGTON STATE DEPARTM<br>REVENUE REGISTRATION (TAX)  |   |
| 600-543-06   | 4 3 4 4 9   |
| 2.C. TYPE OF BUSINESS CONDUCTE   | ED AT THIS SITE MONUFACTURING   |
| 3. NAME OF INSTALLATION  |   |
| PACIFIC SER  | UICES 4 MFG.  |
| 4. LOCATION OF INSTALLATION  |   |
| Street   | DEGERMED  |
| 19331-2157   | AUE W   |
|  |   |
| County Name SNOHOM   | 18H/00/   |
| City or Town   | State VZIRICONANAGEMENT BRANCH  |
| LYNNWOOD   | WA98036-483Z  |
| 5. INSTALLATION MAILING ADDRESS Street or P.O. Box   |   |
|  | N 15 6- 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |
| 1   9   3   3   1   -   2   1   5   T     1  | AUEW State ZID Code   |
| L Y A/ A L ( ) A C A   | State ZIP Code  WA98036-4832  |
| 6.A. INSTALLATION CONTACT  | WA98036-4832  |
| Name (last)  | (first)   |
| 1 5 4 -  | STEVEN  |
| Job Title Mm   | Phone Number  |
| PRODUCTION   | MER 206-775-3513  |
| 6.B. INSTALLATION CONTACT MAILIN   | NATIONAL STATE OF THE PARTY OF |
| Street or P.O. Box   | Ben LA  |
|  |   |
| City or Town   | State ZIP Code  |
|  |   |
| 7.A. NAME OF INSTALLATION'S LEGA   | AL OWNER  |
| WALTERITIPIS   | SCO   |
| Street, P.O. Box, or Route Number  |   |
| 19331-2157   | AVEW  |
| City or Town   | State ZIP Code  |
| LYNNWCOD   | WA98036-4932  |
| 7.B. PROPERTY OWNERSHIP (Provide add   | dress in section 12 if different than 7A.)  |
|  | 500   |
| 7.C. OW  | VNER TYPE 7.D. PROPERTY TYPE  |
| N  | P P PIOSS AND PROPERTY TYPE P PIOSS AND PROPERTY TYPE   |
|  | 10/0/0/0:0  |

| 8.A. NAME OF INSTALLATION TOCITIC C  | services + Manuta  | <u>ecturing</u> 8.B. EPA I.D.                              | NO  |                    |
|--|--|--|---|--------------------|
| 9. TYPES OF REGULATED DANGEROUS instructions for this section carefully—   | WASTE ACTIVITIES \ Enter an "X" in any se                                    | OUR BUSINESS IS Cotions of 9.A., 9.B., or                  | CONDUCTING (Read & fol<br>9.C. below that may app | ollow<br>oly).     |
| 9.A. HAZARDOUS WASTE ACTIVITIES (See   |  | ons of these activities                                    | ).  |                    |
| ☐ 2. TRANSPØRTER 2a. ☐ Transport<br>2b. Modes of Tra   | Wastes Commercially ☐ Highway  | (for hire).<br>/ (2) ☐ Air (3) ☐ R                         | ail (4) ☐ Water (5) ☐                             |                    |
| 3. MANAGEMENT FACILITY (TSD)   | 3b. Process conducte (1) ☐ Treatment (4) ☐ Other (special Sc. Current Part A | d or available at this (2)  Storage (3) Cify in comments). | TE Generators.<br>facility;                       | in comments        |
| 4. IMMEDIATE RECYCLER  | Part B Process [   | ☐ Yes ☐ No   |   |                    |
| 5. PERMIT-BY-RULE FACILITY   |  |  |   |                    |
| 6. MARKET OR BURN DANGEROUS  | WASTE FUELS- 6a. [   | ☐ Generator Marketing to                                   | Burner 6b. 🗆 Other Marke                          | eter               |
|  | 6c. 🗆 Burner. (Co  | OMPLETE 9c.—TYPE OF  | COMBUSTION DEVICE)                                |                    |
| 9.B. USED-OIL FUEL ACTIVITIES.   |  |  |   |                    |
| 1. OFF-SPECIFICATION USED-OIL FUELS-1  | 1a.   Generator Marketing  | to Burner 1b.  Other N                                     | farketer 1c. □ Burner (Compl                      | olete 9c.)         |
| 2. SPECIFICATION USED-OIL FUEL MARKE   |  |  |   |                    |
|  |  |  | TOLE MEETO THE OF EOI TOAT                        | 1011.              |
| 9.C. DANGEROUS WASTE OR OFF-SPECIFIC   | CATION USED-OIL FUE  | L BURNING: TYPE O  | F COMBUSTION DEVICE.                              |                    |
| (see instructions for deligitions of combustion d  |  |  |   |                    |
|  |  |  | modellar i smaco.                                 |                    |
| 10. WASTE IDENTIFICATION (Copy this page if y sheets)  | ou have more than 5 waste stree  | ams—other information (section                             | s 9 and 11-13) not needed on contin               | nuation            |
| A. N. Bis. V. S.   |  | C.   | D. w  | , E.               |
| I M B DESCRIPTION OF WAS   | TE(S)  | DANGEROUS<br>WASTE NUMBER                                  | OR ACTUAL ANNUAL G                                | C<br>O<br>D<br>E   |
| 1 Xylene   |  | F1993 +++  | 480 4   | )                  |
|  |  |  |   |                    |
|  |  |  |   | 1                  |
|  |  |  | <del></del>                                       |                    |
|  |  | <del></del>  |   |                    |
|  |  | <del></del>  |   |                    |
| 11. Complete a, b, or c; AND d below.  | **************************************                                       |  |   | <b></b>            |
| 11.A.  (Batch Frequency)   | QUANTITY WEIGH   | 11.B. PER MO   | NTH 40 F  | CODE               |
| 11.C. ONE-TIME-ONLY  |  | NT TO BE ACCUMULA<br>TE PRIOR TO SHIPMEN                   | TED 480 1   | EIGHT<br>D<br>SODE |
| 12. COMMENTS   |  |  |   |                    |
|  |  |  |   |                    |
|  |  |  |   |                    |
|  |  |  |   | }                  |
| 7  |  | -  | · · · · · · · · · · · · · · · · · · ·             | _                  |
|  |  |  |   |                    |
|  |  |  |   | <del></del> -      |
| 13. CERTIFICATION  |  |  |   | _                  |
| I certify under penalty of law that I have personally documents, and that based on my inquiry of those submitted information is true, accurate, and complete including the possibility of fine and imprisonment. | individuals immediately re-  | sponsible for obtaining the                                | e information. I believe that the                 | ne l               |
| SIGNATURE /  | NAME AND OFFICIA   |  |   |                    |

ECL 2B - 1518-